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14230 U.S. PTO

Please type a plus sign (+) inside this box → ☐PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	1348
	First Inventor or Application Identifier	Wilson
	Title	A Tile Spence Washing and Conditioning Apparatus
	Express Mail Label No.	ER 01560733S US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 32] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]	<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other: _____	
4. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li></ul>		
<b>NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b>		
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		

17. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		40313		or <input checked="" type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)					
Name	David J. Archer				
Address	7037 Pomeroy Rd.				
City	Rockton	State	IL	Zip Code	61072
Country	US	Telephone	815-629-2750	Fax	815-629-2793

Name (Print/Type)	David J. Archer	Registration No. (Attorney/Agent)	31,076
Signature	<i>David J. Archer</i>	Date	MAR 13TH 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



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FEE TRANSMITTAL for FY 1999		Complete if Known		
<i>Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</i>		Application Number		
		Filing Date		
		First Named Inventor	Wilson	
		Examiner Name		
		Group / Art Unit		
TOTAL AMOUNT OF PAYMENT	(\$)	385	Attorney Docket No.	1348

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)
<b>1.</b> <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number <input type="text"/> Deposit Account Name <input type="text"/> <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	<b>3. ADDITIONAL FEES</b> Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid
<b>2.</b> <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other	105 130 205 65 Surcharge - late filing fee or oath
<b>FEE CALCULATION</b>	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.
<b>1. BASIC FILING FEE</b> Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid	139 130 139 130 Non-English specification
101 760 201 380 Utility filing fee 385	147 2,520 147 2,520 For filing a request for reexamination
106 310 206 155 Design filing fee	112 920* 112 920* Requesting publication of SIR prior to Examiner action
107 480 207 240 Plant filing fee	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action
108 760 208 380 Reissue filing fee	115 110 215 55 Extension for reply within first month
114 150 214 75 Provisional filing fee	116 380 216 190 Extension for reply within second month
<b>SUBTOTAL (1) (\$)</b> 385	117 870 217 435 Extension for reply within third month
<b>2. EXTRA CLAIM FEES</b>	118 1,360 218 680 Extension for reply within fourth month
Total Claims 18 - 20** = <input type="text"/> X <input type="text"/> = <input type="text"/>	128 1,850 228 925 Extension for reply within fifth month
Independent Claims 3 - 3** = <input type="text"/> X <input type="text"/> = <input type="text"/>	119 300 219 150 Notice of Appeal
Multiple Dependent <input type="text"/> = <input type="text"/>	120 300 220 150 Filing a brief in support of an appeal
**or number previously paid, if greater; For Reissues, see below	121 260 221 130 Request for oral hearing
Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid	138 1,510 138 1,510 Petition to institute a public use proceeding
103 18 203 9 Claims in excess of 20	140 110 240 55 Petition to revive - unavoidable
102 78 202 39 Independent claims in excess of 3	141 1,210 241 605 Petition to revive - unintentional
104 260 204 130 Multiple dependent claim, if not paid	142 1,210 242 605 Utility issue fee (or reissue)
109 78 209 39 ** Reissue independent claims over original patent	143 430 243 215 Design issue fee
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	144 580 244 290 Plant issue fee
<b>SUBTOTAL (2) (\$)</b> <input type="text"/>	122 130 122 130 Petitions to the Commissioner
	123 50 123 50 Petitions related to provisional applications
	126 240 126 240 Submission of Information Disclosure Stmt
	581 40 581 40 Recording each patent assignment per property (times number of properties)
	146 760 246 380 Filing a submission after final rejection (37 CFR 1.129(a))
	149 760 249 380 For each additional invention to be examined (37 CFR 1.129(b))
	Other fee (specify) <input type="text"/>
	Other fee (specify) <input type="text"/>
	<b>SUBTOTAL (3) (\$)</b> <input type="text"/>
	* Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	David J. Archer	Reg. Number	31,076
Signature	<i>David J. Archer</i>	Deposit Account	
	Date MAR 13 <sup>TH</sup> 2000	User ID	

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